

PTO/SB/22 (06-04)

Approved for use through 7/31/2006. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 21986-00005-US
Application Number	10/003,246-Conf. #4524	Filed December 6, 2001
For METHOD AND EQUIPMENT FOR PRE-TREATMENT OF USED TYRES BEFORE A PYROLYSIS PROCESS		
Art Unit	1764	Examiner James Arnold, Jr.
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$420.00	\$210.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950.00	\$475.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,480.00	\$740.00
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,010.00	\$1,005.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>46,750</u>  <u>Brian J. Hairston</u> Signature		
<u>Brian J. Hairston</u> Typed or printed name <u>(202) 331-7111</u> <u>Telephone Number</u>		
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</small>		
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.	

PTO/SB/17 (10-03)

Approved for use through 7/31/2008. OMB 0851-0032

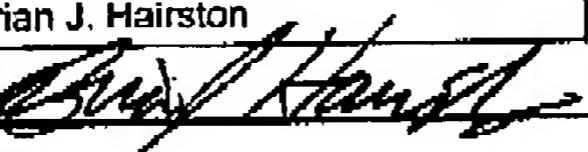
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FEE TRANSMITTAL for FY 2004		Complete if Known	
		Application Number	10/003,246-Conf. #4524
		Filing Date	December 6, 2001
		First Named Inventor	Hannu L. Suominen
		Examiner Name	James Arnold, Jr.
		Art Unit	1764
		Attorney Docket No.	21986-00005-US
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27		
TOTAL AMOUNT OF PAYMENT (\$ 110.00)			

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other <input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account:		3. ADDITIONAL FEES	
Deposit Account Number	22-0185		
Deposit Account Name	Connolly Bove Lodge & Hutz LLP		
The Director is authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments		
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)		0.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	-20** =	<input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>	Fee Paid
Independent Claims	-3** =	<input type="checkbox"/> x <input type="checkbox"/> = <input type="checkbox"/>	
Multiple Dependent		<input type="checkbox"/> = <input type="checkbox"/>	
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 43	Independent claims in excess of 3	
1203 280	2203 145	Multiple dependent claim, if not paid	
1204 66	2204 43	** Reissue Independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		0.00	
** or number previously paid, if greater; For Reissues, see above			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)			
110.00			

(Complete if applicable)

SUBMITTED BY	
Name (Print/Type)	Brian J. Hairston
Signature	
Registration No. (Attorney/Agent)	46,750
Telephone	(202) 331-7111
Date	